1158492

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden

Estimated average burden hours per response 1.00

SEC U	SE ONLY
Prefix	Serial
DATE R	RECEIVED

Name of Offering (check if this is a	n amendment and name has change	d, and indicate	change.)	
Series B Convertible Preferred Stock	•		O ,	
Filing Under (Check box(es) that apply)	: 🗆 Rule 504 🗀 Rule 505	⊠Rule 506	☐ Section 4	4(6) □ ULOE
Type of Filing:	ng			
	A. BASIC IDENTIFICATI	ON DATA		
1. Enter the information requested about	t the issuer			
Name of Issuer (Check if this is an ar	nendment and name has changed, ar	nd indicate chan	ge.)	
Multibeam Systems, Inc.				04020151
Address of Executive Offices	Number and Street, City, State, Zip	Code)	Telephone Nun	nber (Including Area Code)
2090 Duane Avenue, Santa Clara, Ca	ifornia, 95054		(408) 855-8488	3
Address of Principal Business Operation	is (Number and Street, City, State, Zip of	Code)	Telephone Nun	nber (Including Area Code)
(if different from Executive Offices)			•	
			recen	
Brief Description of Business		PRU		
Wafer inspection systems		/	- annl	
Type of Business Organization		MAR I	4 Tons	
	limited partnership, already form	ed THO	MSON D	other (please specify):
□ business trust	☐ limited partnership, to be formed	FINA	NCIAL	
	Mon	th Yea	r	
Actual or Estimated Date of Incorporati	on or Organization: 0_	6 0	1 🗵 .	Actual
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter U.S. Pos	tal Service		
abbreviation for State; CN for Canada;	N for other foreign jurisdiction)		D	E
CENTRO AT INCENTIONIONIO				

GENERAL INSTRUCTIONS

Fadaral

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 2:27 PM

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers. Check Box(es) that Apply: 🛘 Promoter 🗀 Beneficial Owner 🗵 Executive Officer 🗷 Director 📮 General and/or Managing Partner Full Name (Last Name first, if individual) T.S. Ravi Business or Residence Address (Number and Street, City, State, Zip Code) c/o Multibeam Systems, Inc. 2090 Duane Avenue, Santa Clara California, 95054 Check Box(es) that Apply: 🖂 Promoter 🖾 Beneficial Owner 🗵 Executive Officer 🗷 Director 🖂 General and/or Managing Partner Full Name (Last name first, if individual) David Lam Business or Residence Address . (Number and Street, City, State, Zip Code) c/o Multibeam Systems, Inc. 2090 Duane Avenue, Santa Clara California, 95054 Check Box(es) that Apply: Deformater 🗷 Beneficial Owner Defective Officer Deformation Director Deformation and/or Managing Partner Full Name (Last Name first, if individual) DynaFund II, L.P. (Number and Street, City, State, Zip Code) Business or Residence Address c/o DynaFund Ventures, 21515 Hawthorne Blvd., Suite 1200 Torrance, CA 90503 Check Box(es) that Apply: Promoter 🗷 Beneficial Owner 🗅 Executive Officer 🗖 Director 🗖 General and/or Managing Partner Full Name (Last Name first, if individual) Global Strategic Investment, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 4F. No. 65 Section 2 Tun Hwa South Road Taipei, Taiwan, Republic of China Check Box(es) that Apply: 🛘 Promoter 🗖 Beneficial Owner 🖨 Executive Officer 🗷 Director 🗖 General and/or Managing Partner Full Name (Last Name first, if individual) James Ko Business or Residence Address (Number and Street, City, State, Zip Code) c/o DynaFund Ventures, 21515 Hawthorne Blvd., Suite 1200 Torrance, CA 90503 Check Box(es) that Apply: 🕒 Promoter: 🗎 Beneficial Owner: 🔲 Executive Officer: 🗆 Director: 🗀 General and/or Managing Partner Full Name (Last Name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: 🛘 Promoter 🖺 Beneficial Owner 🖺 Executive Officer 🗖 Director 🗖 General and/or Managing Partner Full Name (Last Name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. IN	FORMAT	ION ABO	OUT OFF	ERING					
		-											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										×				
2.	What is th	e minimu				pted from		_			·····		\$	N/A
3.	Does the o	offering pe	ermit joint	ownership	of a sing	le unit?							Yes ∑	No
4.	Enter the commission offering, with a star persons of	on or sim If a persor te or state	ilar remurn to be list s, list the	neration for ed is an as name of th	or solicita sociated p ne broker	tion of pu erson or ag or dealer.	rchasers i gent of a b If more th	n connectroker or contain five (tion with lealer regis 5) persons	sales of stered with to be liste	securities the SEC	in the and/or		
	ame (Last r	ame first,	if individ	ual)										
N/A Busine	ess or Resid	ence Add	ress (Num	ber and St	treet, City.	State, Zip	Code)							
										· 117.2		****		
Name	of Associat	ed Broker	or Dealer	•										
States	in Which P	erson List	ted Has Sc	olicited or	Intends to	Solicit Pu	rchasers		·· ·······					
•	ck "All Stat				•								☐ All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last 1	name first,	if individ	ual)				<u> </u>						
	· · · · · · · · · · · · · · · · · · ·													
Busine	ess or Resid	ence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
Name	of Associat	ed Broke	or Dealer	•	<u>-</u>				1.00 m					
	in Which P													`tataa
	ck "All Stat [AK]									[GA]		[ID]	□ All S	states
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last 1	name first,	, if individ	ual)							<u> </u>			
Busine	ess or Resid	ence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
Name	of Associat	ed Broke	r or Dealer	·										
	in Which F												- AU 6	74.44.
	ck "All Stat			lual States [CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	□ All S	states
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	נעגן [MO]		
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

s b	Enter the aggregate offering price of securities included in this offering and the total amount already old. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this pox and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	S	\$
	Equity	§ 4,913,920	\$ 4,913,920
	☐ Common 🗵 Preferred		<u> </u>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	S	\$
	·	5	\$
			\$ 4.013.030
	Answer also in Appendix, Column 3, if filing under ULOE.	§ 4,913,920	\$4,913,920
o: th	Enter the number of accredited and non-accredited investors who have purchased securities in this ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dolla
		Investors	Amount of Purchases
	Accredited Investors	14	\$ <u>4,913,920</u>
	Non-Accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	·		
S	f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C Question 1.		PLICABLE
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		•
	-		Φ
	Rule 504		2
	Total		\$
s T	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	. 🗆	\$
	Printing and Engraving Costs		\$
	Legal Fees	X	\$20,000
	Accounting Fees		\$
	Engineering Fees		\$ \$
	Sales commission (specify finders' fees separately)		\$
			-
	Total	X	\$20,000

b.	and total expenses furnished in response to F	ffering price given in response to Part C - Quest Part C — Question 4.a. This difference is the "action of the control of the	djustec			002.0	20
5,	Indicate below the amount of the adjusted geach of the purposes shown. If the amount is	gross proceeds to the issuer used or proposed to for any purpose is not known, furnish an estima otal of the payments listed must equal the ad	be us	ed for check	4	<u>,893,9</u>	<u>20</u>
	المستون ر			Payments to Officers, Directors & Affiliates	S	P	ayments to Others
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	· -
	Purchase, rental or leasing and installation of	f machinery and equipment		\$		\$	
	Construction or leasing of plant buildings an	d facilities		\$		\$	
	Acquisition of other business (including the	value of securities involved in this offering that					
		curities of another issuer pursuant to a merger)		\$		\$	·
	Repayment of indebtedness			\$		\$	
	Working capital			\$	K	\$	4,893,9
	Other (specify):			\$		\$	····
	Column Totals			\$	×	\$	- <u>-</u> -
	Total Payments Listed (column totals added))		☒ \$	4,893.	<u>920</u>	
		D. FEDERAL SIGNATURE				<u>-</u>	
sig	nature constitutes an undertaking by the issue	ned by the undersigned duly authorized person. er to furnish to the U.S. Securities and Exchange ceredited investor pursuant to paragraph (b)(2) or	Com	mission, upon writte			_
Is	suer (Print or Type)	Signature	Date				
N	Iultibeam Systems, Inc.	Aldbei		Nove	mber 3	0, 200)3
N	ame of Signer (Print or Type)	Title of Signer (Print or Type)					
1	.S. Ravi	President, Treasurer and Secretary					1

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	
1. Is any party described in 17 CFR 262 presently subject to any of the	Yes No
disqualification provisions of such rule? * See Appendix, Column 5, for state response.	<u> </u>

- 2. The undersigned issuer hereby undertakes to furnish to the state administrators of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.*
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.*
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.*

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Multibeam Systems, Inc.	1200er	November 30, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
T.S. Ravi	President, Treasurer and Secretary	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

^{*}Items 1, 2, 3 and 4 above have been deleted pursuant to the National Securities Market Improvement Act of 1996.

Intend to sell to non-accredited investors in State (Part B-ltem 1)					A	PPENDIX				
Intend to sell to non-accredited investors in State (Part B-ltem 1)	1	2 3				4				
State Yes No		Intend non-acc invest	to sell to credited tors in ate	and aggregate offering price offered in state						
AL	State			(Part C-Item 1)	Accredited		Number of Non- accredited	Amount		No
AK AZ AR CA X Preferred S4,263,920 CO CT DE DC FL GA HI ID Series B Preferred 1 \$400,000 IN IA KS KY LA ME MD MA MI MN MS Series B	AI.						Tilvestors		 	
AZ AR Series B CA X Preferred S4,263,920 CO CT DE DC FL GA HI ID IL X Preferred S400,000 IN IA KS KY LA ME MD MA MI MN MS Series B			<u> </u>		<u> </u>				 	
AR Series B Preferred 12 \$4,263,920 0 0 CO \$4,263,920 0									 	
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CT			X	Preferred	12	\$4,263,920	0	0		X
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